

The Future of Nebraska Medicaid

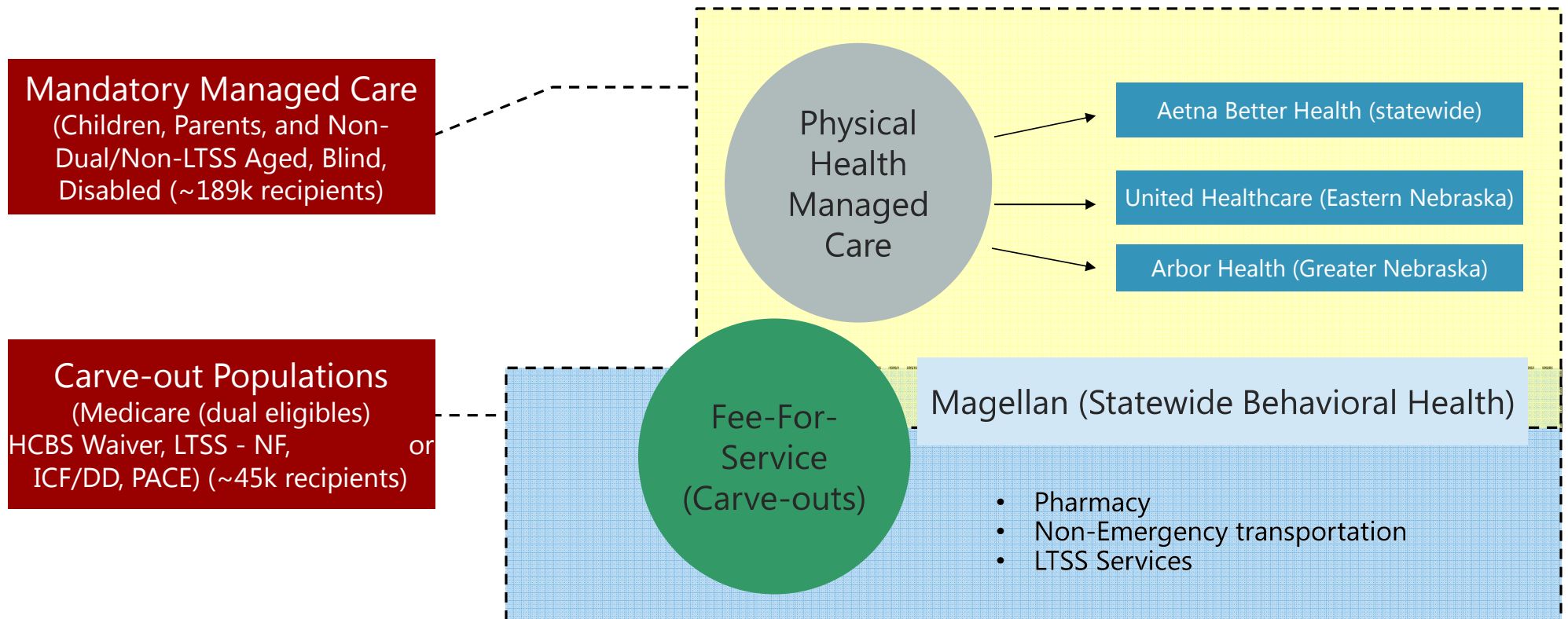
Heritage Health and the
Redesign of Long-Term Services and Supports

August 3, 2016

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Nebraska Department of Health and Human Services

Today's fragmented delivery system



A New Era for Medicaid in Nebraska

- Heritage Health
 - Fully integrated Managed Care
 - Paying few, if any, claims directly
- Enrollment Broker
 - Offering members *Choice Counseling*
- Dental Benefits Manager
 - Establishing a network and paying dental claims
- LTSS Redesign
 - Stakeholder outreach begins NOW
 - Evaluation of current programs
 - Recommendations to better serve the long-term care population
- Data Management and Analytics
 - Complete replacement of MMIS
 - Need for greater analytics power
 - Value-based and outcome-oriented services

Heritage Health

- Nebraska Medicaid released a Request for Proposals (RFP) last fall for Heritage Health, a new managed care program providing integrated health care services.
- Nebraska Medicaid has contracted with three statewide MCOs.
- Each MCO will coordinate a full range of services, including physical health, behavioral health, and pharmacy services.



New Populations

- Heritage Health will include new populations currently excluded from participating in physical health managed care. These include:
 - ✓ Individuals participating in home and community based waivers (Aged and Disabled Waiver, TBI Waiver, and DD Waivers)
 - ✓ Individuals who live in long-term care institutional settings, such as nursing facilities and intermediate care facilities for people with developmental disabilities.
- These individuals will have their physical health (for example, physician and hospital care), behavioral health, and pharmacy services administered by their Heritage Health plan.
- Long-term services and supports will continue to administered as they are today.

Enrolling Members

- Medicaid clients will have opportunity to begin choosing their Heritage Health plan this fall
 - **In April 2016, Nebraska Medicaid signed a contract with Automated Health Systems to act as Medicaid's enrollment broker for the Heritage Health program. The enrollment broker is an independent entity that provides the following services to Medicaid members:**
 - **Plan selection outreach**
 - Written and phone-based outreach alerting Heritage Health members to the open enrollment period and the timeline for making a voluntary plan selection
 - **Comprehensive and unbiased choice counseling**
 - **Searchable databases of providers that allow members to determine whether his/her current primary care provider or preferred specialist is a part of a specific health plan's network prior to the member selecting his/her health plan**

Services not changing under Heritage Health

- Long-term nursing facility and ICF/DD services
- HCBS waiver services
- Personal Assistance Services (PAS)
- Dental services
- Non-Emergency Transportation (NET)



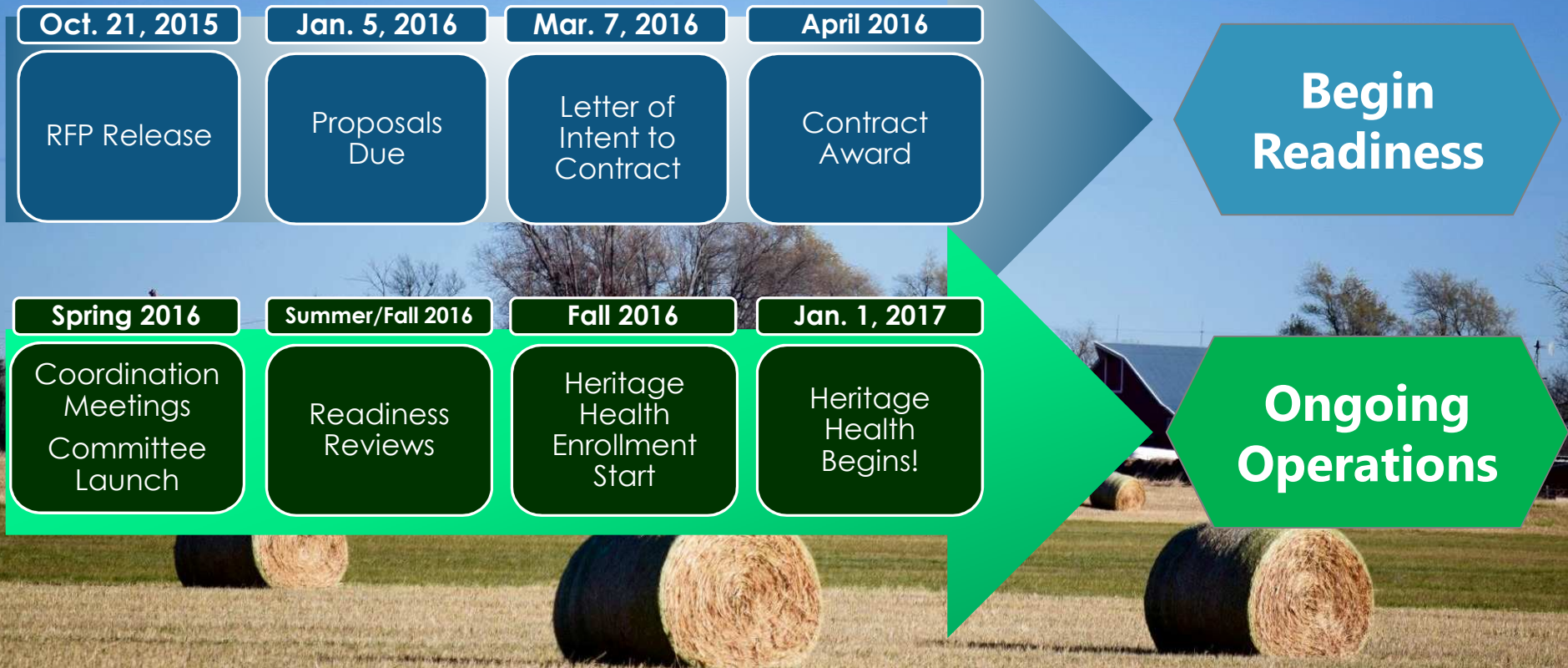
"Secret" Ingredients for a Successful Transformation



Nebraska is transitioning from a fragmented delivery system to a fully integrated managed care program that will operate statewide. Major changes include:

- Carve-in of behavioral and pharmacy services
- Inclusion of LTSS populations (but not services)
- Statewide contracts
- Much greater accountability and transparency

Key Milestones, Ample Time



A Clear Engagement Strategy



Administrative
Simplification



Behavioral
Health
Integration



Quality
Management


Nebraska's Heritage Health Advisory Groups

- State as leading, coordinating force – time for competition is over
- Diverse provider, cross-agency, advocate, consumer participation
- Clear charters and missions
- Organized agendas
- Productive and task-oriented workgroups
- Individual meetings as needed/requested


Planning & Accountability

- *FOUNDATIONAL*: strong contracts
- A clear governance structure for implementation
- Regular, purposeful meetings with clear agendas
- Defined work tracks with designated leads
- Multi-level dashboard to monitor activities and assess risk

Department of Health & Human Services


DHHS
 NEBRASKA

Division of Medicaid and Long-Term Care


HERITAGE
HEALTH

Heritage Health Managed Care Organization Implementation Meeting Agenda

Meeting Date / Time	Monday, July 11, 2016; 9:00 am – 11:00 am
Meeting Location	Nebraska State Office Building 301 Centennial Mall S. Lower Level Conference Room D Lincoln, NE 68509
Conference Line	(888) 820 – 1398 Access Code : 4533256#

Agenda:

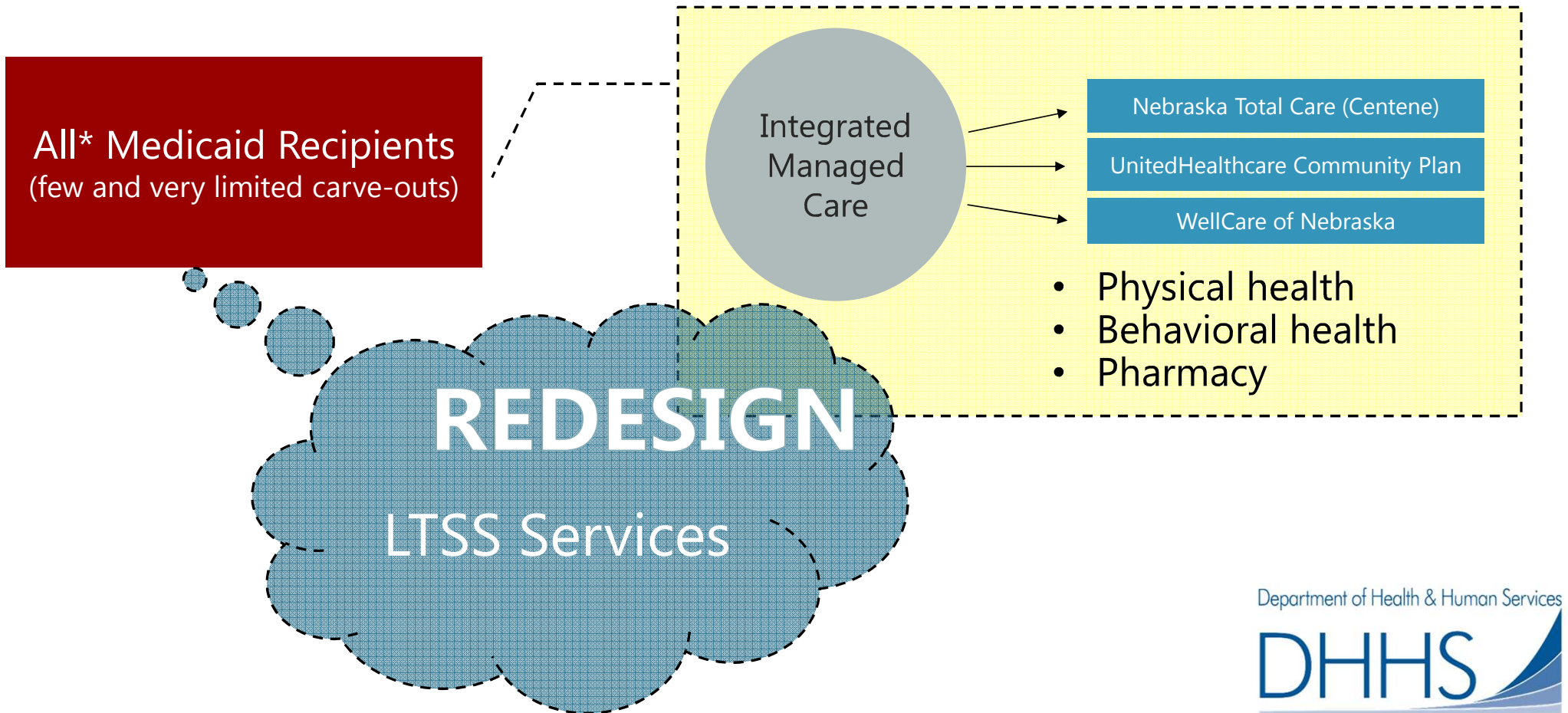
Topics	Facilitator
Welcome & Introductions	Calder Lynch
IPRO Introduction	John Naujokaitis
Enrollment Broker (AHS) enrollment/dis-enrollment rules	Brady Johnson
LTSS Presentation-Aged, Disabled, and TBI Waiver Population & LTSS Redesign Project	Julie Gillmor
Pharmacy Workgroup Update	Shelly Nickerson
Communications Update	Rocky Thompson Carmen Bachle
Technical Workgroup Update	Janet Johnson
Readiness Review Update	Randy Miller Todd Baustert
Reporting Templates Update	Courtney Mason
Roundtable Discussion	Heather Leschinsky
Action Item Assignments/Closing Remarks	Calder Lynch

Opportunities to Learn More

- Dedicated website with posted materials
www.dhhs.ne.gov/HeritageHealth
- Frequent outreach efforts led by state, with MCO participation

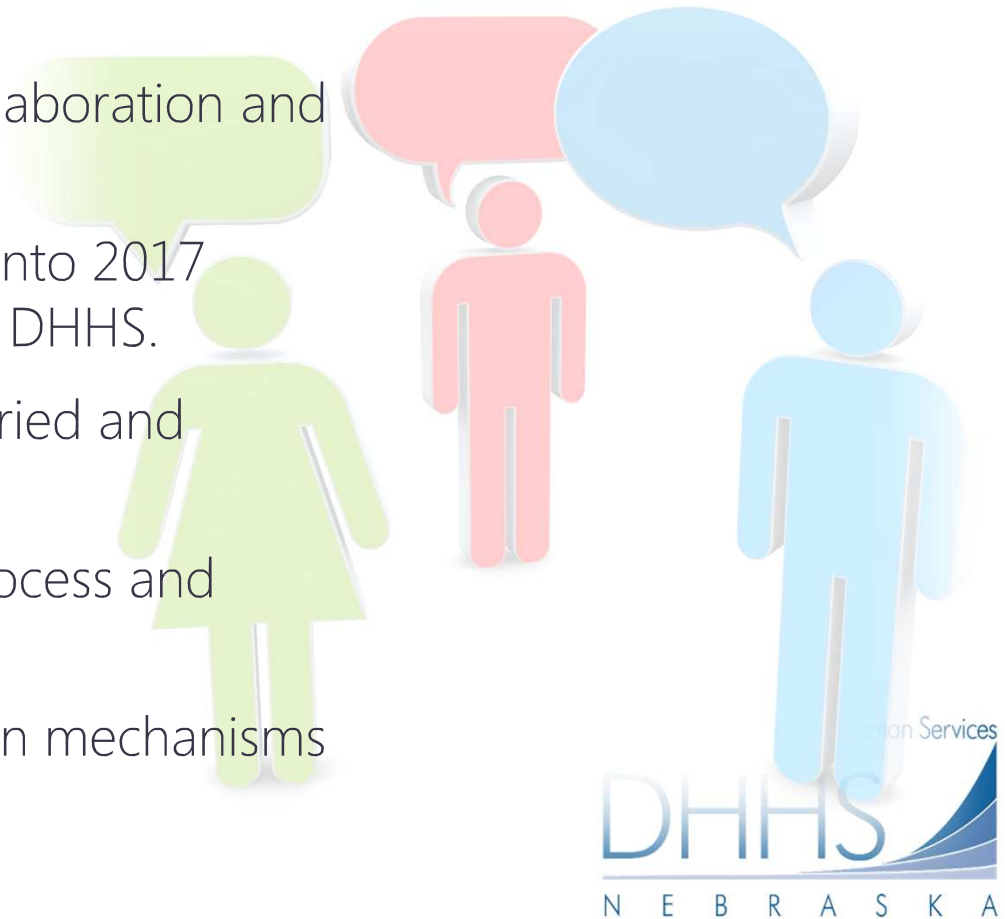


Iterative “To Be” State – Integrated Care



Rethinking Long-Term Care Requires Time and Study

- This process only begins TODAY.
- Concept paper represents catalyst for collaboration and design.
- Redesign planning will continue through into 2017 resulting in a set of recommendations for DHHS.
- Information and input channels will be varied and frequent.
- Mercer/NASUAD engaged to facilitate process and planning – but this is a state-led project.
- DHHS is continuously seeking feedback on mechanisms to improve the stakeholder input process.



Questions and Answers

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All materials and information available online at:

www.dhhs.ne.gov/HeritageHealth
www.dhhs.ne.gov/LTC

